

A7
cons
ANS-binding activity was collected to give a recombinant human L-FABP. The obtained purified protein was subjected to SDS-polyacrylamide gel electrophoresis, and subjected to silver staining, from which only one band was confirmed.--

IN THE CLAIMS:

Please cancel claims 1, 3, 5, 8, and 10-13 without prejudice to or disclaimer of the subject matter contained therein.

Please amend the claims as follows:

A8
Claim 2. (Amended) The method according to claim 16, wherein the liver-type fatty acid binding protein is derived from kidney tissue.

A9
Claim 4. (Amended) The method according to claim 16, wherein the specimen is kidney tissue or urine.

A10
Claim 6. (Amended) The method according to claim 16, which further comprises a step of comparing the test result with that of a control specimen, said control specimen being collected

A10
canis

from a human having normal kidney tissue, or collected from a human having the same kidney disease but showing different symptoms or different progress.

A11

Claim 7. (Amended) The method according to claim 16, wherein the detection of the liver type fatty acid binding protein in step (b) is carried out by using an antibody specifically binding to said liver-type fatty acid binding protein.

sub
C2

A12

Claim 9. (Amended) The method according to claim 7, wherein the antibody specifically binding to the liver-type fatty acid binding protein is an antibody that does not cross-react with a heart muscle-type fatty acid binding protein.

sub
C3

Claim 14. (Amended) A reagent or kit for diagnosis or prognosis, which is used in the method according to any one of claims 16, 2, 4, 6-7, 9, and 17-23.

A13

Claim 15. (Amended) The reagent or kit for diagnosis or prognosis according to claim 14, which contains an antibody specifically binding to liver-type fatty acid binding protein.

Please add the following new claims:

--Claim 16. (New) A method for (diagnosis or prognosis) of a kidney disease in human, which comprises the steps of:

- (a) preparing a specimen collected from a human;
- (b) detecting liver-type fatty acid binding protein contained in said specimen; and
- (c) diagnosing or prognosing the kidney disease based on the test result of the detection in (b).--

A14
C4
--Claim 17. (New) The method according to claim 16, wherein the step (b) is carried out by an immunochemical assay using an antibody specifically binding t) liver-type fatty acid binding protein and contacting the specimen with said antibody.-- (requires separation) of bound/unbound reagent.

--Claim 18. (New) The method according to claim 16, wherein the (existing level) of liver-type fatty acid binding protein in the specimen is diagnostic or prognostic of the kidney disease.--

--Claim 19. (New) The method according to claim 16, which further comprises the step of comparing the test result of the specimen with a different specimen collected from the same human at different stage, and examining the change with the lapse of time.--

use claim
--Claim 20. (New) The method according to 16, being (useful)
for

- A14
cons*
- (i) diagnosing progression of the kidney disease,
 - (ii) prognosing the further progress of kidney disease, or
 - (iii) determining the effect of medication.--

--Claim 21. (New) The method according to claim 16, wherein the kidney disease is a chronic renal disease.--

--Claim 22. (New) The method according to claim 16, wherein the kidney disease is a disease selected from the group consisting of diabetic nephropathy, glomerulonephritis, nephrotic syndrome, focal glomerulosclerosis, immune complex nephropathy, lupus nephritis, drug-induced renal injury, renal insufficiency and kidney graft rejection.--

Response filed on September 10, 2001

--Claim 23. (New) The method according to claim 22,

wherein the immune complex nephropathy is selected from the
group consisting of IgA nephropathy and membranous nephropathy--

sub
CS
A14
Covis